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27581 7590 12/02/2009

MEDTRONIC, INC.
710 MEDTRONIC PARKWAY NE
MINNEAPOLIS, MN 55432-9924

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Madonna Schroeder	(Depositor's name)
/Madonna Schroeder/	(Signature)
February 3, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/943,193	08/29/2001	Kenneth M. Riff	P0009618.00	8485

TITLE OF INVENTION: MEDICAL DEVICE SYSTEMS IMPLEMENTED NETWORK SCHEME FOR REMOTE PATIENT MANAGEMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/02/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
LE, LINH GIANG	3686	705-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Medtronic, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Minneapolis, MN 55432-5640

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
 Publication Fee (No small entity discount permitted)
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4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- A check is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2546 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature / Scott A. Bardell /

Date February 1, 2010

Typed or printed name Scott A. Bardell

Registration No. 39,594

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Kenneth M. Riff et al. Examiner: Ling Giang Le
Serial No. 09/943,193 Group Art: 3686
Filing Date: August 29, 2001 Docket No.: P0009618.00
Conf. No.: 8485
Title: Medical Device Systems Implemented Network Scheme for Remote Patient Management

**FEE ADDRESSEE FOR RECEIPT OF PTO NOTICES
RELATING TO MAINTENANCE FEES**

Mail Stop M Correspondence
Director of the US Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This letter is to specify that the FEE ADDRESSEE for this patent is as follows:

Master Data Center
300 Franklin Center
29100 Northwestern
Southfield, Michigan 48034-1095
U.S.A.
Payor Number: 000124

Any prior FEE ADDRESSEE for the above-identified U.S. patent is hereby revoked.

The above-identified U.S. patent was assigned to Medtronic, Inc., a Minnesota corporation, 710 Medtronic Parkway N.E., M.S. LC340, Minneapolis, Minnesota 55432. The Assignment for the parent application was filed with the United States Patent and Trademark Office on February 4, 2003, REEL/FRAME 012636/0950. It is certified that the person whose signature appears below has the authority to change the FEE ADDRESSEE for this patent.

Respectfully submitted,

Date February 1, 2010

/Scott A. Bardell/
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